

Home alone vs kids club: adult supervision matters for grades

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Abstract

In this paper, we experimentally evaluate the impact of a publicly run after-school program in Chile on students' academic outcomes. The program intended to increase female labor force engagement, and devoted only one-sixth of its time (half an hour per school-day) to academic activities. We found that the program had on average no effect on academic outcomes (school attendance and grades), and no effect for students that before the program were cared by their parent in the after-school hours. However, if the after-school program replaces non-parental care, there is a positive effect on grades, increasing the average GPA and the probability of having a GPA above the median in around 9 pp. If the student was alone in the after-school hours at baseline, this value increases to 13 pp. This evidence suggests that the program's impact on children is determined by the nature of the alternative care available to them. We find that the program quality, the activities developed and the characteristics of the personnel do not affect the program effect. We also find no impact on mother's labor force outcomes for the group of students where we observe improvement in their outcomes. These results are consistent with the program working through the adult supervision provided, instead of through the type of care or the labor market impact.

Keywords: Childcare; randomized control trial; after-school programs

JEL Codes: J13, I25

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1. Introduction

As female labor force participation increases (from 42.4% in 1990 to 56.6% in LAC according to the WDI), a relevant question is who looks after the kids. Ruiz-Casares et al (2018) report figures of 61 developing countries of children under five that are unsupervised or under the supervision of another young (younger than 10 years of age) child for at least one hour/day using UNICEF data. In LAC, the figure is between 5.7% and 0.9%, worldwide between 45.3% and 0.5%.

Unfortunately, there is limited data to systematically analyze the prevalence of different types of care for school-aged children. In the US, Laughlin (2013) reports that 12.6% of children 5 to 14 years were under sibling/other relative care and 11.1% with self-care. Self-care increases with age and depending on the mother's working status¹. In Chile, 64% of first graders are cared by one of their parents after school (54.6% by the mother), 20.9% by their grandparents, 9.8% and 3.4% by other family and non-family members (Junaeb, 2017)². Therefore, there is a substantial fraction of children that are unsupervised or inadequately supervised, which depends on both the country and family characteristics, being the mother employment status a relevant factor.

¹ The fraction of children with working mothers who stay alone at home is 5.6% for 9-11 years old, but 16.1% 12-14 years old children.

² Retrieved on October 8, 2018 from <https://sistemaencuestas.junaeb.cl/encuestasjunaeb/index.jsp>

The absence of adult supervision of school-aged children has been associated with antisocial behavior (Azier, 2004), poor school performance and teenage pregnancy (Dwyer et al, 1990). For school-aged children, an increase in supervised time has been studied typically in the form of more instructional time (more days of school per year or more school hours each day) and after-school programs (ASP).

In the first case, extra hours or days are devoted to academic activities, and therefore effects on school performance are expected. This effect has been studied in developing countries, finding a decrease in teen pregnancy (Berthelon and Kruger, 2011 for Chile), and improvements in both reading and math scores (Bellei, 2009; Berthelon et al, 2016, both for Chile; Hincapie, 2016 for Colombia; Cerdan, 2007 for Uruguay). On developed countries, longer school days also had a positive impact on college enrollment rates (Lavy and Scholoser, 2005) and performance in math, English and science (Lavy, 2012) in Israel and math scores in Denmark) and Italy (Jensen, 2013, and Battistin and Meroni, 2015).

On the other hand, ASPs are structured programs that are run under adult supervision in schools throughout the academic year. The extra hours are used heterogeneously depending on the program objectives. They can include a variety of activities, such as homework time, social interaction, snacks, sports, crafts, etc., or can be specific such as a programming camp. As far as we know, there are no impact evaluations of ASP programs in developing countries. The evidence in developed countries is mixed (Goerlich et al., 2007, Kremer et al., 2015), but suggests that students at risk benefit from ASPs the most (Levine and Zimmerman, 2010) and that expected impacts respond to the type of activities. It also seems relevant to consider

the alternative care children would have in the absence of an ASP program: The lower the quality of the alternative care, the higher the program's impact (Felfe and Zierow, 2012).

In this paper, we report the effects of a public after-school program on students' academic outcomes in a developing country. The program was implemented in Chile and consisted of three hours of care after school for children aged between 6 and 13. The intervention objective was to facilitate female labor force participation, providing children with recreational activities, time for homework (half an hour) and a snack. No resources were devoted to any academic activities.

We randomly offered program applicants (mothers) a spot in the program, and use this variation to identify the program's impact on students' academic outcomes (school attendance and grades). On average, the program had no impact on these variables. However, consistent with the previous literature, we found a positive effect on academic performance for children that, before the program, were not under their parent's supervision after school hours. For this group we find that the program had a positive effect on average grades (physical education, average GPA), and on the probability of being above the median of the grade distribution. Moreover, higher effects were found for children that were alone or at the care of "other adults" (not parents or grandparents) at baseline. The effects are not only statistically significant, but also large; for example, the probability of being above the median grade increased in 13 percentage points for children that were alone at baseline.

There are three mechanisms consistent with the positive impact of the ASP. First, the program could have increased female labor force participation, and consequently family

income (Bernal (2008), Bernal and Keane (2010), Bernal and Keane (2011), Brilli (2014), Black et al (2014)). Second, the improvement of the quality of the supervision after-school hours could by itself generate the results (McCombs et al 2017). And finally, some of the after-school program activities (such as music and art lessons, sports) could have a direct impact on academic outcomes. There is some literature that postulate that exposure to ludic activities could reduce stress levels and improve creativity in children, what in turn could improve academic outcomes.

Although we cannot clearly pin down the mechanism, we present evidence consistent with the supervision effect driving the impact. In Martínez A. and Perticará (2017) we find that the program increased female employment, however in this paper we show that these effect does not correlate with the students' baseline care. This is not consistent with the mothers' labor market mechanism. Furthermore, we show that the student's effect does not depend on the quality of the implementation, which is not consistent with outcomes being driven by the program characteristics. At the same time, as the program has an impact only on students that were taken care by "other adults" or left alone, our results suggest that the driving mechanism is the provision of adult supervision.

Our research offers two main contributions to the literature. First, we measure the causal effect of an ASP on academic outcomes using an RCT in a developing country. Second, we shed light on the mechanism underlying this effect.

In the following sections, we will describe the interventions and the experimental design, data description, empirical strategy, results and conclusions.

2. The Intervention and Experimental Design

2.1 The Intervention

The “4-to-7” ASP program’s objective was to increase the labor force participation of mothers or women responsible for taking care of children aged between 6 and 13, by providing playful activities in after-school hours during the academic year.

The ASP is run by the Ministry of Women and Gender Equity. The Ministry implemented the program in municipalities where a high demand was expected due to the number of children aged 6-13 and female labor force participation. Schools apply for hosting the program through their municipality, and are selected based on three criteria: whether they have an adequate infrastructure, whether they have other ASP programs, and, if possible, whether their SIMCE score had improved.

Mothers apply for the program through the schools. The eligibility requirements are all related to mother’s characteristics: being economically active, older than 18 years old, working or living in the municipality where the participating school is located, and scoring low in the socioeconomic targeting scale. Funds are transferred to the municipalities, which then select the managing organizations (NGOs) through a bidding process. Most programs were open to children from schools other than the host.

The Ministry set up the terms of reference that established the minimum features of the ASP. The program was set up in each school with a maximum of 50 or 100 beneficiaries, where the number of slots was defined *ex-ante* based on potential demand. Each program had a

coordinator. Programs with 50 students must have two monitors, and programs with 100 students must have five. Coordinators were required to have formal training in the areas of education, psychology or business. It was recommended that monitors should be teachers of the implementing school. However, this was the case only in 85% of the monitors in our sample. Instructors were professionals or higher-education students in the areas of education, sports, arts, etc. 77.3% of the participating schools were assigned 50 slots, and the remaining 22.7% 100 slots.

The intervention consisted of three hours of after-school care during the school week. As the schools did not have the same daily schedule, the program's times varied across schools. However, most schools in the evaluation (18 out of 25) offered the program from 4 to 7 pm.³

As specified in the terms of reference, the program should follow the following schedule: arrival (10 minutes), motivation (20 minutes), school-work support (30 minutes), a recess where a snack was provided (30 minutes), and a thematic workshop (90 minutes). School-work support was structured to help students with their homework, teach them study methods and reinforce lessons. Thematic workshops were related to art, sports or TICs. Each ASP program decided which thematic workshops were to be implemented, based on the students' interest and age. The most common were those related to arts (crafts, theater, dance, music, cinema, circus), followed by TICs and sports.

³ Only one school offered the program during the morning. In the rest of the schools, the program was run in the afternoon, the starting time varying from 2 pm to 5 pm.

Concurrently with the impact evaluation, an independent process evaluation was performed in 22 out of the 25 schools participating in the study. Each ASP program was visited twice, with the purpose of documenting its implementation. The number of monitors required by protocols was met in 72.7% of the schools. The figure rose to 94% in schools which had been assigned 50 slots. Attendance was low, reaching an average of 17.5 students. Considering the low attendance rate, the ratio of monitors to students was higher than what was recommended in the program's terms of reference.

2.2 Experimental Design

The impact evaluation took place in 25 schools where the program was implemented for the first time in 2012. Mothers or legal guardians of 6-13 year-old children were invited to apply for the ASP. In order to do so, they were required to fill out an application form, specifying how many children were to attend and some demographic and schooling data. Women were also asked to answer a full questionnaire concerning their individual and family labor and socioeconomic characteristics.

As all schools were overenrolled, we randomized available spots. The unit of randomization was the mother, so that, if a woman was offered a spot in the program, all the children reported in her application form got an invitation to attend the ASP. This has to be done in order to abide by the main objective of the program, which is to help women find employment. For each available slot we had 1.7 applicants (mothers). Randomization was stratified considering the mothers' baseline work status and whether they had small children

(younger than five). The offering process was done by the implementing agency.⁴ The evaluation timeline is in Figure 1.

3. Data and Descriptive Statistics

3.1 Data

We used the administrative data provided by the Ministry of Education on attendance and grades in the implementing year. All outcome variables come from these data and therefore are limited to the students' academic achievements. Monthly attendance is reported by the Ministry of Education as the fraction of the monthly school days each child attended. Grades are reported as the end of the year average by subject and overall GPA.

These administrative data are merged with the experimental data (treatment assignment, strata, and baseline characteristics), and self-reported information on baseline childcare use provided by mothers in the ASP application form. It is also merged with a follow-up household survey with the sole purpose of use reported program take-up. Finally, we also merged in data from the process evaluation, to measure the program's quality.

⁴ As participating schools were not selected randomly, we cannot guarantee external validity. However, in our companion paper we report that there were no observable differences in school size, vulnerability, or in the mother's and children's characteristics in comparable schools.

Although the implementing agencies were required to collect attendance data for the ASP, this was not strictly enforced, and the collected data was unreliable. Therefore, we do not use this attendance rate in our impact analysis.

3.2 Baseline Characteristics and Balance

Table 1 presents the data on the outcome of the randomization process. The original sample of eligible children at baseline consisted of 1,358 children in the treatment group and 1,208 in the control group. Twenty-five percent of the children in the control group attended the program (as reported by their mothers); in the treatment group, this figure was 57% (column [4]). The low take-up decreased the power of the experiment, limiting, therefore, the probability of finding effects.⁵

Descriptive statistics and balance are reported in Table 2. Panels A and B report characteristics for both children and mothers, respectively. For each variable, we show the sample mean, standard deviation and number of observations at baseline (columns [1]-[3]), the treatment and control mean (columns [4] and [5]), and the p-value of the null that the treatment and control group means are equal (column [6])⁶.

⁵ In Appendix Table A1 we show that students attending the program are more likely to study in the school where it is implemented. Their mothers have lower per capit income and less years of education.

⁶ Note that some of these variables are missing in some observations. For this reason, the sample size varies in each row of the table.

Students were on average 9.7 years old and in 4th grade; 47% of them were female. Only 52% of the students were offered the ASP in their own school. Their average grade in the previous academic year was 5.6 (grades in Chile range between 1-7, being 4 the minimum required to pass), and their average attendance 89% (85% is required to pass, with some exceptions). Almost 60% of the children were not under their parents supervision at baseline: 38% were under the care of another adult (grandmother, neighbor, other family members), and 11% were on their own.

Mothers were on average 37 years old and had 2.2 children. 53% of them were household heads. Their average years of education were 9.4, and the *per capita* household income was US\$116. Finally, 63% of the children were in the stratum characterized by mothers working at baseline and not having children younger than five years old.

The p-values in column [6] show that the groups were balanced in all these variables. Therefore, the randomization could allow us to estimate the causal impact of the program, and it is not necessary to control any of these variables in our regressions.⁷

3.3 Attrition

The two outcome variables (grades and attendance) are compiled in different data sets by the Ministry of Education, and therefore there are different attrition rates. Regarding attendance,

⁷ There is no statistical difference in the reported variables in Table 2 between schools with 50 and 100 slots. However, there is a higher take-up in schools with 100 slots.

we find approximately 93% of students at baseline. The level of attrition is higher (almost 11%) for grades in 2012. Hence, the final estimation sample comprised 2,284 in the grade data and 2,379 children in the attendance data.

We study whether attrition of attendance and grade is correlated with treatment assignment in Table 3. The dependent variable is the probability of being in the administrative data, and the parameters of interest are the coefficients of the treatment variable. Columns [1] and [4] report the correlation of treatment assignment with the probability of being in final regressions (for attendance and grades, respectively) without controls. Column [2] and Column [5] include control variables (child's age, gender, and a dummy indicating if they used childcare at baseline, mother's age, education, household head, *per capita* household income and the number of children). Finally, in column [3] and [6] we interact them with treatment assignment (not shown). In all cases, the coefficients of treatment assignment are not significant. Furthermore, the full set of interactions is jointly not different from zero. Therefore, there is no differential attrition by treatment arm.

However, we find that the older the children, the more likely they are to have follow-up data on their grades. Although the estimated coefficient is very small, we control age in all our regressions.

4. Results

4.1 Estimated Equation and Interpretation

Our main equation is as follows:

$$Y_{ij} = \alpha_j + \beta T_{ij} + \delta y_{ij,t-1} + \gamma age_{ik} + v_{ij} \quad (1)$$

Where i refers to the individual, j to school strata (defined by the mother's working status and whether they have children younger than 5 at baseline). T_{ij} is an indicator of the treatment assignment, $y_{ij,t-1}$ is the lagged value of the dependent variable, age_{ij} is the student's age, and α_j are school-strata fixed effects. Whenever the baseline value of the dependent variable is missing, we impute a zero, and include a dummy indicating if the value was imputed. Standard errors are clustered at school level.⁸ β represents the Intent-to-Treat estimate. As there seems to be substantial imperfect compliance, these estimates might differ from the ATE.

We also investigate the existence of differential effects according to the baseline use of childcare, the program quality and the location. To study these heterogeneities, for a given

⁸ We have 25 clusters, which might lead to over rejection of the null. Our results are robust to this correction, and are reported in Annex Tables B1-B5. This is consistent with Cameron, Gelbach, and Miller (2008) simulations, that show that with 20 clusters the size of the tests using clustered robust standard errors is close to the nominal one.

subgroup we define a dummy variable $D_{ijk} = 1$ if individual i in school j and strata k belongs to this particular group, zero otherwise. Then we estimate the following equation:

$$Y_{ijk} = \alpha_{jk} + \beta T_{ijk} + \theta T_{ijk} * D_{ijk} + \pi D_{ijk} + \delta y_{ijk,t-1} + \gamma X_{ijk} + v_{ijk} \quad (2)$$

Where β represents the program impact for students not belonging to the subgroup D_i , π represents the heterogeneous impact of the treatment on the sub-group and θ is the impact of belonging to this sub-group.

As we are conducting multiple hypothesis on several different outcomes, we are presenting in Annex Tables C1-C4 multiple hypothesis adjusted p-values using Romano and Wolf (2005)'s stepdown hypothesis testing algorithm. We are using the algorithm coded by Clarke (2016).

4.2 Average Effects

Average effects are presented in Table 4. Panel A shows the effects on attendance and Panel B on grade-related outcomes, both in the implementing year (2012). Columns [1], [2] and [3] report the program's impact on attendance rate for the May-November period (implementing months) and the probability of passing the 90% and 95% attendance rate, respectively.⁹ We

⁹ 85% is the passing rate in Chile, with some exceptions.

observe that average attendance rates are high (90.7% in 2012,), and that the program had no impact upon any measurement of attendance.¹⁰

Regarding academic outcomes (Panel B), the point estimates of the program effects are all positive, but small in magnitude and only significant for grades on physical education. However, the effect is not robust to the consideration of the multiple tests used (Table C3). This result is consistent with the program's design, which assigned only 30 minutes for homework and offered mostly workshops on arts and sports.

4.3 Heterogeneous Effects

In this section, we report different heterogenous effects to shed light on how the program could have an impact on students' outcomes. First, the literature reports that the ASP program effects depend on the alternative childcare. We then study whether the program's effects depend on who takes care of the children at baseline (Table 5). Secondly, as the literature also points out that the program effect depends on the quality of the program, we report the heterogeneous program impact with various measures of quality in Table 6. This analysis also sheds light on how the program affects outcomes: if the quality is not important, this is consistent with a larger impact of the supervision time rather than the activities in the after

¹⁰We also do not find effects on attendance in 2013, the year after the implementation. Results can be made available upon request.

school. We also explore if the activities developed in the program affect its outcome in Table 7.

Third, the ASP program could have an impact on students' outcomes through its effect on female labor supply. In a companion paper, we report the existence of a small average impact on labor force participation and employment of mothers' offered the ASP. In the same paper, we report the existence of heterogeneous impact based on the mother's baseline work status and presence of small children in the household. In this paper, we study if the existence of heterogeneous effects on students' outcomes is in the same groups (Table 8).

Baseline Childcare

Regarding baseline childcare, mothers reported in the survey who takes care of the child after school. For the purposes of analysis, we defined a variable (non-parental care) that takes the value of 1 if the children used any kind of childcare after school or were left alone at baseline, and of 0 if they were taken care of by their parents. Results in Panel A, Table 5 report the interactive effect for children with non-parental care.

As all reported results correspond to ITT, it is relevant to look at the program's take-up in these two groups. Although take-up is slightly higher in children with non-parental care at baseline (what is consistent with families substituting the ASP for other forms of childcare), the difference is not statistically different from zero (Table 5, column [1]). Therefore, results are not mechanically driven by differences in use but could be driven by differences in alternative care.

The first row of Table 5, panel A shows that the program's assignment for the base category (parental care at baseline) has a negative impact on attendance, although the coefficients are not always significant. On the contrary, for students that under non-parental care at baseline, coefficients are always positive, and significant at the 5% when the outcome is attendance rate over 95%. Regarding grades, the coefficients for students under parental care at baseline are insignificant in all grade outcomes, but always negative, suggesting that substituting institutional care for parental care does not necessarily improve children's outcomes. On the other hand, the coefficients for students under non-parental care at baseline are positive and significant for 90% attendance, art, language, average GPA and the probability of having a GPA over the median. The overall GPA increased in 1.2 decimals (column [10]), the grade in art in 1.5 decimals (column [5]) and the grade in language and literature in 1.3 decimals (column [7]). The program also increased the probability of being above the median in 8.6 percentage points (column [11]). The coefficients on other grade outcomes were also positive, but not significant. Therefore, the ASP program had a positive impact on these students.

In panel B, Table 5, we open the "non-parental care at baseline" into its main components: care by other adults, siblings and alone. Again, column [1] shows that although take-up is higher for some of these groups with different types of childcare at baseline, all these coefficients are not statistically different from zero.

Furthermore, it shows that the positive effects in Panel A are mostly observed in children that are either left alone at home or placed under the care of another adult (relatives and non-

relatives). In fact, the greater effects are for children left alone, which could be related to the fact that the program provides them with a safe environment. For these children, there is a strong impact (323 pp) on attendance rates, suggesting that the program might have had a deterring effect on absenteeism. This effect is relatively large, considering that attendance rates are high (around 91% for the control group). There is also a positive effect in grades: The effect on average GPA is of 0.19 points (column [10]) and on the probability of having a GPA above the median of 13.4 pp. All these effects are robust to wild cluster, but although the general conclusion does not change (Table B2), some of them are no significant when considering multiple hypotheses (Table C1).

The positive impact of ASP being restricted to non-adult supervision or non-parental adult is consistent with previous results in the literature on the importance of the counterfactual care for ASP program impact. Substituting ASP for informal care does have a positive impact on children's academic performance.

Program Quality

The quality of the program can also play an important role when considering its potential impact if what matters is how good the program is in relation to alternative care. On the other hand, if relative quality does affect the program impact, it would be consistent with the hypothesis the adult supervision, not the quality of the ASP, is driving the program impacts.

In Table 6, we report the interactive impact of several measures of program quality. Each coefficient reported corresponds to θ in equation (2), where we still control by the treatment

dummy and the quality measure dummy. Each row of Table 6 corresponds to a different measure of quality. Above median quality index is a dummy with that takes the value of 1 if the program is above the median quality, where quality was measured by an index that captures the quality of infrastructure, teachers, and materials, as measured in the process evaluation. In the second and third row, we present measures of monitor's quality: a dummy that takes value of 1 if at least 25% of monitors are school teachers and if monitors have on average at least 3 years of experience. We then measure quality as related with the thirty minutes that should be dedicated to homework time, first with an indicator reporting if the time was defined at the beginning of the school year, and secondly if the time was set fixed in the same month. Finally, we study the existence of an interactive effect with the activities planning (if activities found in the process evaluation were those planned at the beginning of the year), and the observed student/monitor ratio.

It is striking that independent on how quality is measured, it does not seem to have an impact on attendance or grades outcomes. Some coefficients in Table 6 are significant, but when the multiple hypotheses are considered in Table C2, this significance disappears.¹¹

¹¹ It is important to note that take-up does not differ by quality (column [1], table 6), and that therefore the effects are again not mechanically driven by differences in use.

Summing up, we do not find any evidence that the program quality had a differential impact on the ASP effects. These results should be taken with caution. First, our quality measures might not capture relevant differences in quality. We are constrained by what was observed in the process evaluation to define quality measures. Second, the average quality was high, for example, 70% of schools had program components defined in March and 80% had the homework time defined in the same period.

Activities

We also investigate if the type of activities in the ASP had a differential impact on the program's outcome. If not, this would also be consistent with the dominant impact coming from the supervision effects.

Table 7 shows the interactive effect of different measures of activities according to having at least one course of TIC, social science, personal care and sports. All the schools offered at least one course in art (music, drama, painting, etc.). Our results suggest that there are not differential effects depending on the type of course offered.

Mothers' Labor Market outcomes

As previously mentioned, the program can have a direct effect on academic outcomes through the curriculum or providing better care than the alternative available to them. The

effect could also be indirect by increasing the family disposable income through female employment and decreasing childcare cost.

In Martínez A. and Perticará (2017) we find that the ASP had a positive impact on mothers' employment. To understand if these effects drive the students' outcomes, we analyze the existence of heterogeneous effects on female labor market outcomes (labor force participation, employment, and income) according to the children care at baseline. Results are presented in Table 8. There is no systematic impact of the ASP by baseline parental care on any of the labor market outcomes. Given that, the stronger effects are found in the group of who are not cared by their parents at baseline, and particularly on those who are left alone, these results are not consistent with labor market effects driving the program's impact on student outcomes.

4. Conclusions

We studied the impact of an after-school program on children's academic outcomes in Chile using an experimental strategy. We found that the program had no average impact on academic outcomes (grades and attendance).

However, there are large and statistically significant effects for children who were not taken care of by their parents during the program's hours at baseline. Moreover, the stronger effects were found in children left alone at home at baseline and in children who were taken care of by non-relative adults. Although the data of its prevalence is limited, informal care

arrangements for children are a common strategy. Our results show that providing them with a safe environment might increase attendance rates and their academic achievements. The most robust results were found in art grades, overall GPA and the probability of being above the median of the grade distribution.

Although the design does not allow us to test the mechanisms driving the effects directly, the program characteristics and the heterogeneous analysis reported can shed light on them. First, the program only had 30 minutes for homework time per day, and most of the time was devoted to playful activities. Therefore, it was not set up as an academic ASP. Also, the quality of the program and the activities did not have a differential impact on the ASP effects. The short time devoted for academic activities, and the lack of importance of the quality and activities, are consistent with a supervision channel being more relevant than the activities themselves. Furthermore, the effect is most substantial in, arguably, the worst types of informal childcare, which is again consistent with the importance of adult supervision. Finally, we do not find evidence that the effect is driven by the program's labor market effects on their mothers.

An after-school program can then have a positive impact on students' outcomes for children when the quality of the alternative care is low. The adult supervised care seems to dominate other mechanisms in the Chilean setting. Both conclusions could be considered in the program design, in the program targeting as well as in its planning.

Further research on other outcomes, particularly on the socio-emotional dimension is relevant. Research designs that could directly address the mechanism underlying the program impacts would also be relevant.

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Table 1: Compliance Rates

	Base Line	In follow-up	Participating	Participation Rate
	[1]	[2]	[3]	[4]=[3]/[2]
Control	1,208	1,073	267	0.25
Treatment	1,358	1,184	668	0.56
Total	2,566	2,257	935	

Note: Columns [1] and [2] indicate the number of applicants who were surveyed at the baseline and follow-up. Column [3] presents the number of applicants who report having participated in the program (take-up).

Table 2: Balance between treatment and control group at baseline

Variables	Average [1]	SD [2]	N° [3]	Treatment [4]	Control [5]	P-value T=C [6]
Panel A: Students						
Age	9.72	2.26	2566	9.76	9.68	0.424
Female	0.47	0.50	2566	0.47	0.47	0.352
Grade	4.04	2.03	2557	4.06	4.03	0.775
=1 if attend school where the program is given	0.52	0.50	2566	0.5	0.53	0.553
GPA (previous year)	5.59	0.65	2014	5.58	5.6	0.564
GPA (previous year) is missing	0.22	0.41	2566	0.22	0.21	0.671
Attendance rate (previous year)	0.89	0.13	2379	0.89	0.89	0.656
Attendance rate (previous year) is missing	0.07	0.26	2566	0.07	0.07	0.911
=1 if uses non parental childcare at baseline	0.57	0.50	2105	0.55	0.59	0.732
=1 if child is taken care of by an adult at baseline	0.38	0.49	2105	0.38	0.38	0.408
=1 if child is left alone at home at baseline	0.11	0.31	2105	0.10	0.11	0.492
=1 if child is left with siblings at baseline	0.09	0.28	2105	0.07	0.09	0.32
Panel B: Mothers						
Age	36.89	8.55	2561	36.92	36.87	0.821
=1 if household head	0.53	0.50	2566	0.52	0.54	0.867
# of children	2.19	1.16	2566	2.19	2.18	0.950
Years of education	9.37	3.22	2482	9.35	9.39	0.822
Per capita income of household (US\$)	116	86	2544	117	116	0.287
Works and children <5 years old	0.20	0.40	2566	0.20	0.20	0.246
Does not work and children <5 years old	0.06	0.23	2566	0.06	0.06	0.679
Works and children >5 years old	0.63	0.48	2566	0.63	0.62	0.343
Does not work and children >5 years old	0.11	0.32	2566	0.11	0.12	0.680

Note: Baseline survey data collected from March to May 2012. The sample size varies according to the amount of data without observations for each respective variable. Income variable is measured in U\$ dollars (march 2013). Columns [1], [2] and [3] show the variable mean for the total of the sample, the standard deviation and the number of observations, respectively. Column [4] and [5] show the variable mean for the treatment and control group, respectively. Column [6] the p-value of the null hypothesis that Treatment=Control.

Table 3: Attrition and Base Line Characteristics

	In final regressions (attendance)			In final regressions (grades)		
	[1]	[2]	[3]	[4]	[5]	[6]
Treatment (T)	-0.001 (0.012)	-0.005 (0.011)	0.030 (0.053)	-0.008 (0.012)	-0.008 (0.011)	-0.086 (0.072)
Gender		-0.008 (0.013)	-0.018 (0.017)		-0.010 (0.015)	-0.004 (0.024)
Age		0.004 (0.003)	0.005 (0.003)		0.017*** (0.003)	0.012*** (0.004)
Mother's Age		-0.002* (0.001)	-0.002 (0.002)		-0.002 (0.001)	-0.001 (0.002)
Household Head		-0.002 (0.016)	0.009 (0.019)		-0.020 (0.015)	-0.017 (0.023)
# of kids		-0.005 (0.008)	-0.010 (0.010)		-0.012 (0.010)	-0.017 (0.021)
=1 if any kind of childcare		-0.008 (0.017)	0.002 (0.017)		0.000 (0.019)	-0.001 (0.027)
Per-capita income in household		-0.000 (0.000)	-0.000 (0.000)		-0.000 (0.000)	-0.000 (0.000)
Constant		1.005*** (0.073)	0.994*** (0.084)		0.855*** (0.075)	0.898*** (0.106)
Observations	2,566	2,014	2,014	2,566	2,014	2,014
R-squared	0.104	0.135	0.136	0.078	0.125	0.126
F-test: all interactions with treatment are zero (p-value)			0.552			0.320
Controls	No controls	Controls	Controls and interactions of controls and treatment variable	No controls	Controls	Controls and interactions of controls and treatment variable

Note: The dependent variable takes a value of 1 if the individual was found on either attendance data (columns [1]-[3]) or grades data (columns [4]-[6]). The sample are all students participating in the study (with baseline). The sample size varies according to the missing covariate data. Standard error in brackets. *** p < 0.01, ** p < 0.05, * p < 0.10.

Table 4: Intent-to-Treat Effects in Attendance and Grade (2012)

	Panel A: Attendance			Panel B: Grades						
	Attendance rate May-November	=1 if attendance rate is >0.90	=1 if attendance rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA	=1 if above the median
	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
Treatment	0.006 (0.005)	-0.002 (0.024)	0.015 (0.026)	0.043 (0.029)	0.055** (0.026)	0.010 (0.032)	0.030 (0.032)	0.012 (0.027)	0.020 (0.022)	0.016 (0.023)
Observations	2,379	2,379	2,379	2,280	2,277	2,280	2,280	2,280	2,284	2,284
R-squared	0.276	0.231	0.218	0.309	0.276	0.372	0.348	0.396	0.488	0.359
Control group mean	0.907	0.677	0.365	5.926	6.250	5.134	5.149	5.231	5.532	0.494

Note: Columns [1] - [9] report the intent-to-treat (ITT) estimates and standard errors (in parenthesis) of program assignment. The sample size varies according to the number of observations with missing values in the respective outcome variable. This sample is obtained merging both baseline and administrative data. All regressions include school-strata fixed effects and control for age. Cluster standard errors at school level are given in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

Table 5: Heterogenous Effects by Childcare use at baseline (2012)

	First Stage Program Participation	Attendance			Grades						
		Attendance rate May-November	=1 if attendance rate is >0.90	=1 if attendance rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA 2012	=1 if above the median
		[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
Panel A: Parental versus non-parental care											
Treatment	0.255*** (0.056)	-0.001 (0.006)	-0.067* (0.036)	-0.070** (0.027)	-0.030 (0.052)	-0.014 (0.045)	-0.076 (0.050)	-0.029 (0.069)	-0.051 (0.063)	-0.050 (0.038)	-0.032 (0.029)
Treatment * Non-parental care at baseline	0.058 (0.059)	0.012 (0.009)	0.114* (0.059)	0.110** (0.052)	0.147** (0.054)	0.100 (0.069)	0.128* (0.071)	0.073 (0.082)	0.106 (0.080)	0.123** (0.053)	0.086** (0.037)
Observations	2,131	2,379	2,379	2,379	2,280	2,277	2,280	2,280	2,280	2,284	2,284
R-squared	0.230	0.277	0.234	0.223	0.313	0.280	0.373	0.349	0.398	0.489	0.362
Control group mean	0.254	0.907	0.677	0.365	5.926	6.250	5.134	5.149	5.231	5.532	0.494
p-value full effect	0.000	0.105	0.293	0.349	0.001	0.069	0.239	0.347	0.174	0.044	0.121
Panel B: By type of care											
Treatment	0.254*** (0.057)	-0.001 (0.006)	-0.068* (0.036)	-0.070** (0.027)	-0.031 (0.052)	-0.014 (0.045)	-0.076 (0.050)	-0.030 (0.069)	-0.053 (0.063)	-0.051 (0.038)	-0.032 (0.029)
Treatment * Other adults	0.028 (0.066)	0.007 (0.009)	0.089 (0.068)	0.056 (0.059)	0.147** (0.071)	0.125 (0.077)	0.135 (0.079)	0.109 (0.089)	0.159* (0.091)	0.143** (0.061)	0.090** (0.039)
Treatment * Siblings	0.083 (0.098)	0.009 (0.016)	0.114 (0.083)	0.095 (0.068)	0.040 (0.092)	-0.017 (0.100)	-0.020 (0.145)	-0.127 (0.171)	-0.110 (0.134)	-0.044 (0.105)	0.005 (0.079)
Treatment * Alone	0.127 (0.090)	0.032*** (0.011)	0.203*** (0.080)	0.307*** (0.074)	0.227*** (0.068)	0.110 (0.090)	0.217* (0.114)	0.119 (0.097)	0.104 (0.096)	0.187*** (0.056)	0.134* (0.077)
Observations	2,131	2,379	2,379	2,379	2,280	2,277	2,280	2,280	2,280	2,284	2,284
R-squared	0.232	0.280	0.235	0.227	0.313	0.281	0.374	0.351	0.400	0.491	0.363
Control group mean	0.254	0.907	0.677	0.365	5.926	6.250	5.134	5.149	5.231	5.532	0.494
P-values full effect											
Other Adult	0.000	0.416	0.689	0.764	0.022	0.037	0.323	0.195	0.052	0.047	0.163
Alone	0.000	0.002	0.061	0.003	0.002	0.243	0.150	0.441	0.635	0.041	0.184

Note: Columns [2] - [10] report the intent-to-treat (ITT) estimates and standard errors (in parenthesis) of program assignment. Column [1] reports the first stage program participation. The sample size varies according to the number of observations with missing values in the respective outcome variable. In panel A, non-parental care is a dummy variable that takes value of 1 for all the kids who weren't taken care of by their parents at baseline, zero otherwise. In panel B, the base category is taken care of by parents. All regressions include school-strata fixed effects and control for age. Cluster standard errors at school level are given in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

Table 7: Heterogenous Effects by workshop theme

	Panel A: Attendance				Panel B: Grades						
	First Stage Program Participation	Attendance rate May- November	=1 if attendance rate is >0.90	=1 if attendance rate is >0.95	Art	Physical Education	Lenguage and Literature	Math	Science	GPA	=1 if above the median
	[1]	[2]	[3]	[4]	[6]	[7]	[8]	[9]	[10]	[11]	[12]
	Panel A: Quality										
(1) Above median quality index (Mean= 0.579)	0.032 (0.075)	0.003 (0.011)	0.075* (0.042)	0.034 (0.052)	0.051 (0.056)	-0.012 (0.049)	-0.016 (0.072)	0.040 (0.066)	0.032 (0.052)	0.030 (0.045)	0.054 (0.044)
p-value full effect	0.000	0.235	0.546	0.525	0.123	0.211	0.902	0.417	0.650	0.349	0.288
(2) At least 25% of monitors are school teachers (Mean= 0.226)	-0.021 (0.071)	0.013 (0.014)	-0.017 (0.064)	-0.056 (0.048)	-0.013 (0.084)	0.034 (0.072)	-0.029 (0.080)	-0.073 (0.062)	0.024 (0.058)	-0.008 (0.057)	-0.001 (0.075)
p-value full effect	0.000	0.221	0.688	0.373	0.731	0.219	0.766	0.493	0.573	0.817	0.945
(3) Monitors with above the median experience (4 yrs) (Mean= 0.497)	0.045 (0.080)	-0.002 (0.010)	-0.012 (0.049)	-0.014 (0.055)	-0.035 (0.057)	0.041 (0.054)	-0.048 (0.067)	-0.037 (0.067)	0.004 (0.057)	0.006 (0.046)	0.001 (0.046)
p-value full effect	0.000	0.422	0.666	0.932	0.659	0.089	0.637	0.949	0.786	0.592	0.878
(4) Program components defined by march (Mean= 0.697)	-0.019 (0.095)	0.006 (0.006)	0.063 (0.037)	0.012 (0.055)	0.096* (0.052)	0.011 (0.046)	0.054 (0.066)	0.085 (0.068)	0.013 (0.046)	0.050 (0.041)	0.099** (0.043)
p-value full effect	0.000	0.501	0.792	0.754	0.052	0.161	0.773	0.257	0.966	0.319	0.087
(5) Fixed time slot devoted to study (Mean= 0.801)	0.004 (0.099)	-0.023 (0.019)	-0.046 (0.039)	-0.069 (0.052)	-0.011 (0.050)	-0.062 (0.051)	-0.080 (0.087)	0.061 (0.085)	-0.061 (0.071)	-0.028 (0.053)	0.050 (0.073)
p-value full effect	0.000	0.518	0.791	0.758	0.053	0.162	0.774	0.259	0.967	0.320	0.091
(6) Planification is closely followed (Mean= 0.420)	-0.009 (0.087)	-0.004 (0.010)	-0.040 (0.047)	0.015 (0.056)	0.029 (0.055)	-0.005 (0.053)	0.014 (0.067)	-0.020 (0.066)	-0.019 (0.057)	0.001 (0.044)	0.011 (0.045)
p-value full effect	0.001	0.585	0.218	0.645	0.031	0.171	0.851	0.799	0.947	0.501	0.718
(7) Students/Monitor ratio is below the median (Mean= 0.560)	-0.203** (0.074)	-0.002 (0.006)	-0.049 (0.051)	-0.048 (0.053)	-0.008 (0.061)	-0.013 (0.052)	-0.038 (0.066)	-0.089 (0.070)	0.016 (0.058)	-0.030 (0.046)	-0.115*** (0.039)
p-value full effect	0.000	0.899	0.323	0.724	0.422	0.204	0.442	0.593	0.915	0.803	0.124

Note: Columns [2] - [10] report the intent-to-treat (ITT) estimates and standard errors (in parenthesis) of program assignment interacted with different measures of the program quality. Column [1] reports the first stage por program participation. The sample size varies according to the number of observations with missing values in the respective outcome and quality variable.

The different high quality dummies are defined in the following way:

(1) Above median quality index. The quality index is defined including measures of infrastructure, materials and monitor quality as reported in the process evaluation. The index does not include measures related to children's behavior. (2) At least 25% of monitors are school teachers. (3) On average, monitors have at least 4 years (median) of experience. (4) By march, the program components were already defined. (5) There was a fixed time slot devoted to study. (6) Planification (as describe in the original proposal) is closely followed (all the observed activities are described in the original plan). (7) Students/Monitor ratio is below the median.

All regressions include school-strata fixed effects and control for age. Cluster standard errors at school level are given in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

Table 7: Heterogenous Effects by workshop theme

	Panel A: Attendance				Panel B: Grades							
	First Stage Program Participation	Attendance rate May- November	=1 if attendance rate is >0.90	=1 if attendance rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA	=1 if above the median	
	[1]	[2]	[3]	[4]	[6]	[7]	[8]	[9]	[10]	[11]	[12]	
	Panel A: Quality											
(1) At least one TICs course (Mean= 0.286)	-0.121 (0.073)	-0.006 (0.009)	0.042 (0.061)	0.005 (0.060)	0.068 (0.045)	0.006 (0.060)	0.027 (0.054)	0.111 (0.073)	0.049 (0.053)	0.043 (0.045)	0.030 (0.042)	
	p-value full effect	0.001	0.749	0.634	0.730	0.005	0.261	0.365	0.110	0.282	0.177	0.194
(2) At least one science (including social sciences) course (Mean= 0.543)	0.013 (0.078)	0.005 (0.009)	-0.030 (0.050)	0.025 (0.052)	0.045 (0.060)	0.019 (0.051)	0.073 (0.061)	0.021 (0.069)	0.023 (0.057)	0.022 (0.046)	0.050 (0.045)	
	p-value full effect	0.000	0.237	0.545	0.439	0.014	0.034	0.315	0.287	0.541	0.185	0.195
(3) At least one personal care course (Mean= 0.425)	-0.008 (0.077)	-0.005 (0.008)	0.015 (0.049)	0.008 (0.050)	-0.004 (0.061)	0.032 (0.048)	-0.090 (0.059)	0.069 (0.067)	0.051 (0.051)	0.003 (0.045)	0.008 (0.049)	
	p-value full effect	0.000	0.193	0.882	0.576	0.417	0.020	0.274	0.215	0.199	0.513	0.591
(4) At least one sport course (Mean= 0.771)	-0.024 (0.121)	0.001 (0.017)	0.013 (0.041)	-0.042 (0.055)	-0.016 (0.061)	-0.039 (0.039)	-0.089 (0.070)	0.032 (0.066)	-0.045 (0.053)	-0.036 (0.045)	0.010 (0.051)	
	p-value full effect	0.000	0.147	0.991	0.824	0.226	0.112	0.812	0.361	0.925	0.574	0.479
(5) At least one art course (Mean= 0.784)	-0.138 (0.132)	0.012* (0.007)	0.004 (0.048)	0.032 (0.071)	-0.052 (0.077)	0.006 (0.067)	0.073 (0.060)	-0.045 (0.060)	-0.036 (0.076)	-0.013 (0.055)	-0.024 (0.049)	
	p-value full effect	0.000	0.143	0.961	0.462	0.247	0.041	0.539	0.597	0.867	0.443	0.651
(6) At least one drama, dance or circus course (Mean= 0.669)	0.098 (0.085)	0.007 (0.008)	-0.023 (0.050)	-0.029 (0.056)	0.010 (0.052)	0.013 (0.051)	-0.048 (0.057)	-0.053 (0.069)	-0.014 (0.050)	-0.011 (0.043)	-0.012 (0.045)	
	p-value full effect	0.000	0.220	0.739	0.875	0.239	0.057	0.872	0.782	0.854	0.550	0.667
(7) At least one music course (Mean= 0.093)	0.052 (0.176)	0.007 (0.016)	0.120 (0.097)	0.140 (0.091)	-0.110* (0.063)	-0.119*** (0.037)	0.226** (0.087)	0.207** (0.086)	0.112 (0.105)	0.059 (0.086)	-0.033 (0.080)	
	p-value full effect	0.057	0.419	0.259	0.111	0.314	0.054	0.012	0.010	0.265	0.373	0.863

Note: Columns [2] - [10] report the intent-to-treat (ITT) estimates and standard errors (in parenthesis) of program assignment interacted with workshop themes dummies. Column [1] reports the first stage per program participation. The sample size varies according to the number of observations with missing values in the respective outcome and workshop theme.

Note that at each school children could attend different kind of workshops. Workshop themes dummies are defined to indicate whether at each school at least one workshop was offered in seven different areas: sciences or more academic subjects; personal care; sports, arts, drama/dance/circus; arts; music.

All regressions include school-strata fixed effects and control for age. Cluster standard errors at school level are given in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

Table 8: Mother's outcomes. Heterogenous Effects by Childcare use at baseline

	Labor Force Participation			Employment			Income		
	Participates (at least one month during May-Dec)	Participates (always)	Months Participating (May-Dec)	Works (at least one month during May-Dec)	Works (always)	Worked Months	Working Hours	Monthly Income	Hourly Income
	[1]	[2]	[3]	[4]		[5]	[6]	[7]	[8]
Panel A: Parental versus non-parental care									
Treatment	-0.043 (0.029)	-0.003 (0.036)	-0.180 (0.236)	-0.002 (0.028)	-0.017 (0.033)	0.193 (0.287)	1.167 (1.536)	26.018* (13.885)	0.192 (0.164)
Treatment * Non-parental care at baseline	0.058 (0.037)	0.014 (0.036)	0.291 (0.219)	0.003 (0.035)	0.017 (0.039)	0.145 (0.313)	-1.848 (1.961)	-15.589 (21.177)	0.148 (0.329)
Observations	1,874	1,874	1,874	1,874	1,874	1,655	1,594	1,567	1,525
R-squared	0.150	0.163	0.173	0.160	0.161	0.225	0.184	0.174	0.122
Control group mean	0.682	0.546	4.884	0.648	0.475	6.245	28.396	263.863	1.828
p-value full effect	0.654	0.794	0.686	0.977	0.999	0.263	0.687	0.489	0.178
Panel B: By type of care									
Treatment	-0.043 (0.029)	-0.003 (0.036)	-0.182 (0.235)	-0.002 (0.028)	-0.017 (0.033)	0.192 (0.285)	1.167 (1.527)	25.791* (13.922)	0.193 (0.166)
Treatment * Other adults	0.043 (0.052)	0.009 (0.043)	0.229 (0.330)	-0.022 (0.047)	-0.006 (0.046)	0.009 (0.393)	-2.931 (2.015)	-10.420 (20.693)	0.093 (0.322)
Treatment * Siblings	0.167** (0.079)	0.070 (0.099)	0.906 (0.625)	0.111 (0.078)	0.069 (0.098)	0.652 (0.701)	3.695 (4.608)	14.682 (44.505)	0.485 (0.478)
Treatment * Alone	0.027 (0.055)	-0.006 (0.081)	0.076 (0.515)	0.005 (0.063)	0.057 (0.104)	0.239 (0.741)	-2.445 (3.753)	-50.316 (35.698)	0.073 (0.481)
Observations	1,874	1,874	1,874	1,874	1,874	1,655	1,594	1,567	1,525
R-squared	0.154	0.166	0.177	0.164	0.163	0.227	0.186	0.176	0.122
Control group mean	0.682	0.546	4.884	0.648	0.475	6.245	28.396	263.863	1.828
P-values full effect									
	Other Adult	0.993	0.919	0.795	0.647	0.681	0.480	0.388	0.427
	Alone	0.725	0.903	0.922	0.955	0.644	0.694	0.691	0.316

Note: Columns [2] - [10] report the intent-to-treat (ITT) estimates and standard errors (in parenthesis) of program assignment. Column [1] reports the first stage program participation. The sample size varies according to the number of observations with missing values in the respective outcome variable. In panel A, non-parental care is a dummy variable that takes value of 1 for all the kids who weren't taken care of by their parents at baseline, zero otherwise. In panel B, the base category is taken care of by parents. All regressions include school-strata fixed effects and control for age. Cluster standard errors at school level are given in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

Table A-1: Descriptive statistics of takers and non-takers

Variables	Average [1]	SD [2]	N° [3]	Non-takers [4]	Takers [5]	P-value T=C [6]
Panel A: Children						
Age	9.68	2.23	1358	9.75	9.64	0.415
Female	0.47	0.50	1358	0.47	0.48	0.604
Grade	4.03	2.02	1354	4.14	4	0.349
=1 if attend school where the program is given	0.53	0.50	1358	0.36	0.69	0.000
GPA (previous year)	5.60	0.65	1067	5.66	5.57	0.126
GPA (previous year) is missing	0.21	0.41	1358	0.22	0.19	0.477
Attendance rate (previous year)	0.89	0.13	1261	0.89	0.89	0.849
Attendance rate (previous year) is missing	0.07	0.26	1358	0.06	0.06	0.245
=1 if uses non parental childcare at baseline	0.59	0.49	1124	0.56	0.62	0.243
=1 if child is taken care of by an adult at baseline	0.38	0.49	1124	0.38	0.37	0.852
=1 if child is left alone at home at baseline	0.11	0.32	1124	0.10	0.14	0.140
=1 if child is left with siblings at baseline	0.09	0.29	1124	0.08	0.11	0.312
Panel B: Mothers						
Age	36.87	8.45	1355	36.75	37.19	0.963
=1 if household head	0.54	0.50	1358	0.56	0.52	0.372
# of children	2.18	1.17	1358	2.13	2.21	0.147
Years of education	9.39	3.17	1314	9.87	8.91	0.043
Per capita income of household (US\$)	116	78	1346	119	110	0.057
Works and children <5 years old	0.20	0.40	1358	0.24	0.17	0.121
Does not work and children <5 years old	0.06	0.23	1358	0.06	0.06	0.876
Works and children >5 years old	0.62	0.49	1358	0.59	0.65	0.352
Does not work and children >5 years old	0.12	0.32	1358	0.11	0.12	0.535

Note: Baseline survey data collected from March to May 2012. The sample size varies according to the amount of data without observations for each respective variable. Income variable is measured in US\$ dollars (march 2013). Columns [1], [2] and [3] show the variable mean for the total of the sample, the standard deviation and the number of observations, respectively. Column [4] and [5] show the variable mean for the treatment and control group, respectively. Column [6] the p-value of the null hypothesis that Treatment=Control.

Table B-1: Intent-to-Treat Effects in Attendance and Grade (2012) - wild.cluster corrected p-values

		Panel A: Attendance			Panel B: Grades						
		Attendance rate May- November	=1 if attendace rate is >0.90	=1 if attendace rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA	=1 if above the median
		[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
Treatment		0.006	-0.002	0.015	0.043	0.055**	0.010	0.030	0.012	0.020	0.016
	p-value	0.214	0.915	0.514	0.149	0.043	0.764	0.361	0.65	0.37	0.475
Observations		2,379	2,379	2,379	2,280	2,277	2,280	2,280	2,280	2,284	2,284
R-squared		0.276	0.231	0.218	0.309	0.276	0.372	0.348	0.396	0.488	0.359
Control group mean		0.907	0.677	0.365	5.926	6.250	5.134	5.149	5.231	5.532	0.494

Note: This table reproduces results in Table 4 in text, but presents wild-cluster adjusted p-values. Columns [1] - [9] report the intent-to-treat (ITT) estimates and wild-cluster adjusted p-values of program assignment. The sample size varies according to the number of observations with missing values in the respective outcome variable. This sample is obtained merging both baseline and administrative data. All regressions include school-strata fixed effects and control for age. *** p<0.01, ** p<0.05, * p<0.1.

Table B-2: Heterogenous Effects by Childcare use at baseline (2012) - wild cluster corrected p-values

	First Stage Program Participation	Attendance				Grades						
		Attendance rate May-November	=1 if attendace rate is >0.90	=1 if attendace rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA 2012	=1 if above the median	
		[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]	[11]
Panel A: Parental versus non-parental care												
Treatment	0.255***	-0.001	-0.067*	-0.070**	-0.030	-0.014	-0.076	-0.029	-0.051	-0.050	-0.032	
p-value	0.000	0.842	0.075	0.011	0.562	0.770	0.145	0.690	0.442	0.221	0.296	
Treatment * Non-parental care at baseline	0.058	0.012	0.114*	0.110*	0.147**	0.100	0.128*	0.073	0.106	0.123**	0.086**	
p-value	0.306	0.165	0.076	0.064	0.012	0.16	0.082	0.381	0.214	0.041	0.031	
Observations	2,131	2,379	2,379	2,379	2,280	2,277	2,280	2,280	2,280	2,284	2,284	
R-squared	0.230	0.277	0.234	0.223	0.313	0.280	0.373	0.349	0.398	0.489	0.362	
Control group mean	0.254	0.907	0.677	0.365	5.926	6.250	5.134	5.149	5.231	5.532	0.494	
p-value full effect	0.000	0.115	0.315	0.335	0.003	0.076	0.248	0.319	0.163	0.042	0.125	
Panel B: By type of care												
Treatment	0.254***	-0.001	-0.068*	-0.070**	-0.031	-0.014	-0.076	-0.030	-0.053	-0.051	-0.032	
p-value	0.000	0.829	0.076	0.012	0.56	0.764	0.146	0.676	0.432	0.217	0.304	
Treatment * Other adults	0.028	0.007	0.089	0.056	0.147**	0.125	0.135	0.109	0.159	0.143**	0.090**	
p-value	0.666	0.419	0.233	0.363	0.029	0.116	0.102	0.233	0.105	0.025	0.026	
Treatment * Siblings	0.083	0.009	0.114	0.095	0.040	-0.017	-0.020	-0.127	-0.110	-0.044	0.005	
p-value	0.433	0.559	0.172	0.156	0.667	0.877	0.916	0.555	0.512	0.704	0.958	
Treatment * Alone	0.127	0.032**	0.203**	0.307***	0.227***	0.110	0.217*	0.119	0.104	0.187***	0.134	
p-value	0.148	0.014	0.015	0.001	0.005	0.233	0.087	0.224	0.29	0.009	0.108	
Observations	2,131	2,379	2,379	2,379	2,280	2,277	2,280	2,280	2,280	2,284	2,284	
R-squared	0.232	0.280	0.235	0.227	0.313	0.281	0.374	0.351	0.400	0.491	0.363	
Control group mean	0.254	0.907	0.677	0.365	5.926	6.250	5.134	5.149	5.231	5.532	0.494	
P-values full effect												
	Other Adult	0.000	0.436	0.054	0.001	0.020	0.266	0.334	0.441	0.048	0.051	0.196
	Alone	0.000	0.004	0.715	0.767	0.004	0.040	0.178	0.180	0.633	0.059	0.157

Note: This table reproduces results in Table 5 in text, but presents wild-cluster adjusted p-values. Columns [2] - [10] report the intent-to-treat (ITT) estimates and wild-cluster p-values of program assignment. Column [1] reports the first stage for program participation. The sample size varies according to the number of observations with missing values in the respective outcome variable. In panel A, non-parental care is a dummy variable that takes value of 1 for all the kids who weren't taken care of by their parents at baseline, zero otherwise. In panel B, the base category is taken care of by parents. All regressions include school-strata fixed effects and control for age. *** p<0.01, ** p<0.05, * p<0.1.

Table B-3: Heterogenous Effects by Quality (2012) - wild cluster corrected p-values

	Panel A: Attendance					Panel B: Grades					
	First Stage Program Participation	Attendance rate May- November	=1 if attendance rate is >0.90	=1 if attendance rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA	=1 if above the
	[1]	[2]	[3]	[4]	[6]	[7]	[8]	[9]	[10]	[11]	[12]
	Panel A: Quality										
(1) Above median quality index (Mean= 0.579)	0.032**	0.003	0.075	0.034	0.051	-0.012	-0.016	0.040	0.032	0.030	0.054
p-value	0.018	0.820	0.133	0.555	0.468	0.793	0.857	0.554	0.548	0.525	0.288
p-value full effect	0.000	0.250	0.545	0.513	0.167	0.218	0.912	0.435	0.647	0.343	0.290
(2) At least 25% of monitors are school teachers (Mean= 0.226)	-0.021	0.013	-0.017	-0.056	-0.013	0.034	-0.029	-0.073	0.024	-0.008	-0.001
p-value	0.782	0.395	0.822	0.390	0.935	0.661	0.791	0.369	0.684	0.897	0.988
p-value full effect	0.000	0.399	0.806	0.621	0.794	0.306	0.837	0.573	0.710	0.836	0.831
(3) Monitors with above the median experience (4 yrs) (Mean= 0.497)	0.045	-0.002	-0.012	-0.014	-0.035	0.041	-0.048	-0.037	0.004	0.006	0.001
p-value	0.586	0.856	0.813	0.808	0.581	0.472	0.503	0.601	0.951	0.903	0.981
p-value full effect	0.002	0.470	0.672	0.931	0.681	0.115	0.652	0.956	0.797	0.610	0.866
(4) Program components defined by march (Mean= 0.697)	-0.019	0.006	0.063	0.012	0.096	0.011	0.054	0.085	0.013	0.050	0.099*
p-value	0.865	0.341	0.188	0.826	0.197	0.822	0.495	0.260	0.784	0.306	0.096
p-value full effect	0.000	0.510	0.796	0.752	0.083	0.177	0.746	0.248	0.964	0.312	0.085
(5) Fixed time slot devoted to study (Mean= 0.801)	0.004	-0.023	-0.046	-0.069	-0.011	-0.062	-0.080	0.061	-0.061	-0.028	0.050
p-value	0.974	0.442	0.286	0.254	0.851	0.337	0.430	0.522	0.457	0.613	0.545
p-value full effect	0.000	0.554	0.791	0.740	0.073	0.171	0.797	0.244	0.964	0.325	0.084
(6) Planification is closely followed (Mean= 0.420)	-0.009	-0.004	-0.040	0.015	0.029	-0.005	0.014	-0.020	-0.019	0.001	0.011
p-value	0.926	0.680	0.416	0.810	0.611	0.935	0.835	0.770	0.755	0.991	0.803
p-value full effect	0.003	0.643	0.249	0.653	0.079	0.254	0.866	0.804	0.962	0.525	0.745
(7) Students/Monitor ratio is below the median (Mean= 0.560)	-0.203**	-0.002	-0.049	-0.048	-0.008	-0.013	-0.038	-0.089	0.016	-0.030	-0.115**
p-value	0.019	0.733	0.362	0.389	0.899	0.794	0.554	0.240	0.820	0.531	0.014
p-value full effect	0.005	0.912	0.351	0.740	0.462	0.216	0.460	0.594	0.936	0.797	0.163

Note: This table reproduces results in Table 6 in text, but presents wild-cluster adjusted p-values. Columns [2] - [10] report the intent-to-treat (ITT) estimates and wild-cluster p-values of program assignment interacted with different measures of the program quality. Column [1] reports the first stage for program participation. The sample size varies according to the number of observations with missing values in the respective outcome and quality variable.

The different high quality dummies are defined in the following way:

(1) Above median quality index. The quality index is defined including measures of infrastructure, materials and monitor quality as reported in the process evaluation. The index does not include measures related to children's behavior. (2) At least 25% of monitors are school teachers. (3) On average, monitors have at least 4 years (median) of experience. (4) By march, the program components were already defined. (5) There was a fixed time slot devoted to study. (6) Planification (as describe in the original proposal) is closely followed (all the observed activities are described in the original plan). (7) Students/Monitor ratio is below the median.

All regressions include school-strata fixed effects and control for age. *** p<0.01, ** p<0.05, * p<0.1.

Table B-4: Heterogenous Effects by Workshop Theme - wild cluster corrected p-values

	Panel A: Attendance				Panel B: Grades						
	First Stage Program Participation	Attendance rate May- November	=1 if attendance rate is >0.90	=1 if attendance rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA	=1 if above the median
	[1]	[2]	[3]	[4]	[6]	[7]	[8]	[9]	[10]	[11]	[12]
Panel A: Quality											
(1) At least one TICs course (Mean= 0.286)	-0.121	-0.006	0.042	0.005	0.068	0.006	0.027	0.111	0.049	0.043	0.030
p-value	0.161	0.471	0.494	0.936	0.200	0.932	0.640	0.191	0.422	0.373	0.502
p-value full effect	0.000	0.663	0.643	0.722	0.076	0.323	0.354	0.143	0.374	0.248	0.220
(2) At least one science (including social sciences) course (Mean= 0.543)	0.013	0.005	-0.030	0.025	0.045	0.019	0.073	0.021	0.023	0.022	0.050
p-value	0.887	0.570	0.562	0.626	0.492	0.723	0.269	0.781	0.691	0.644	0.304
p-value full effect	0.001	0.285	0.535	0.468	0.022	0.053	0.336	0.312	0.561	0.209	0.211
(3) At least one personal care course (Mean= 0.425)	-0.008	-0.005	0.015	0.008	-0.004	0.032	-0.090	0.069	0.051	0.003	0.008
p-value	0.930	0.579	0.777	0.872	0.958	0.512	0.173	0.342	0.358	0.949	0.880
p-value full effect	0.000	0.193	0.900	0.595	0.455	0.055	0.426	0.210	0.249	0.501	0.671
(4) At least one sport course (Mean= 0.771)	-0.024	0.001	0.013	-0.042	-0.016	-0.039	-0.089	0.032	-0.045	-0.036	0.010
p-value	0.865	0.986	0.765	0.474	0.792	0.347	0.281	0.648	0.416	0.449	0.860
p-value full effect	0.000	0.156	0.987	0.816	0.238	0.108	0.822	0.337	0.916	0.558	0.498
(5) At least one art course (Mean= 0.784)	-0.138	0.012	0.004	0.032	-0.052	0.006	0.073	-0.045	-0.036	-0.013	-0.024
p-value	0.340	0.108	0.940	0.691	0.550	0.966	0.281	0.560	0.641	0.807	0.642
p-value full effect	0.000	0.153	0.967	0.470	0.259	0.036	0.535	0.615	0.868	0.465	0.660
(6) At least one drama, dance or circus course (Mean= 0.669)	0.098	0.007	-0.023	-0.029	0.010	0.013	-0.048	-0.053	-0.014	-0.011	-0.012
p-value	0.300	0.437	0.670	0.656	0.848	0.824	0.428	0.479	0.785	0.805	0.807
p-value full effect	0.000	0.230	0.738	0.858	0.252	0.064	0.885	0.787	0.873	0.564	0.673
(7) At least one music course (Mean= 0.093)	0.052	0.007	0.120	0.140	-0.110	-0.119	0.226**	0.207**	0.112	0.059	-0.033
p-value	0.756	0.814	0.436	0.376	0.220	0.143	0.035	0.033	0.390	0.538	0.723
p-value full effect	0.143	0.812	0.541	0.429	0.283	0.228	0.060	0.050	0.314	0.445	0.813

Note: This table reproduces results in Table 7 in text, but presents wild-cluster adjusted p-values. Columns [2] - [10] report the intent-to-treat (ITT) estimates and wild-cluster p-values of program assignment interacted with workshop themes dummies. Column [1] reports the first stage program participation. The sample size varies according to the number of observations with missing values in the respective outcome and workshop theme.

Note that at each school children could attend different kind of workshops. Workshop themes dummies are defined to indicate whether at each school at least one workshop was offered in seven different areas: sciences or more academic subjects; personal care; sports, arts, drama/dance/circus; arts; music.

All regressions include school-strata fixed effects and control for age. Cluster standard errors at school level are given in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

Table B-5: Mother's outcomes by childcare at baseline - wild cluster corrected p-values

	Labor Force Participation			Employment			Income			
	Participates (at least one month during May- [1]	Participates (always) [2]	Months Participating (May-Dec) [3]	Works (at least one month during May- [4]	Works (always) [5]	Worked Months [6]	Working Hours [7]	Monthly Income [8]	Hourly Income [9]	
Panel A: Parental versus non-parental care										
Treatment	-0.043	-0.003	-0.180	-0.002	-0.017	0.193	1.167	26.018*	0.192	
p-value	0.136	0.943	0.454	0.949	0.621	0.494	0.416	0.067	0.314	
Treatment * Non-parental care at baseline	0.058	0.014	0.291	0.003	0.017	0.145	-1.848	-15.589	0.148	
p-value	0.14	0.686	0.199	0.945	0.681	0.625	0.34	0.47	0.675	
Observations	1,874	1,874	1,874	1,874	1,874	1,655	1,594	1,567	1,525	
R-squared	0.150	0.163	0.173	0.160	0.161	0.225	0.184	0.174	0.122	
Control group mean	0.682	0.546	4.884	0.648	0.475	6.245	28.396	263.863	1.828	
p-value full effect	0.646	0.771	0.678	0.976	0.998	0.260	0.675	0.493	0.183	
Panel B: By type of care										
Treatment	-0.043	-0.003	-0.182	-0.002	-0.017	0.192	1.167	25.791*	0.193	
p-value	0.131	0.936	0.45	0.947	0.62	0.492	0.412	0.07	0.311	
Treatment * Other adults	0.043	0.009	0.229	-0.022	-0.006	0.009	-2.931	-10.420	0.093	
p-value	0.401	0.83	0.508	0.669	0.888	0.979	0.147	0.611	0.782	
Treatment * Siblings	0.167*	0.070	0.906	0.111	0.069	0.652	3.695	14.682	0.485	
p-value	0.053	0.468	0.16	0.165	0.461	0.358	0.429	0.743	0.375	
Treatment * Alone	0.027	-0.006	0.076	0.005	0.057	0.239	-2.445	-50.316	0.073	
p-value	0.601	0.942	0.883	0.922	0.595	0.75	0.503	0.182	0.895	
Observations	1,874	1,874	1,874	1,874	1,874	1,655	1,594	1,567	1,525	
R-squared	0.154	0.166	0.177	0.164	0.163	0.227	0.186	0.176	0.122	
Control group mean	0.682	0.546	4.884	0.648	0.475	6.245	28.396	263.863	1.828	
P-values full effect										
	Other Adult	0.993	0.919	0.795	0.647	0.681	0.480	0.388	0.427	0.546
	Alone	0.725	0.903	0.922	0.955	0.644	0.694	0.691	0.362	0.316

Note: Columns [2] - [10] report the intent-to-treat (ITT) estimates and standard errors (in parenthesis) of program assignment. Column [1] reports the first stage per program participation. The sample size varies according to the number of observations with missing values in the respective outcome variable. In panel A, non-parental care is a dummy variable that takes value of 1 for all the kids who weren't taken care of by their parents at baseline, zero otherwise. In panel B, the base category is taken care of by parents. All regressions include school-strata fixed effects and control for age. Cluster standard errors at school level are given in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

		Panel A: Attendance			Panel B: Grades						
		Attendance rate May- November	=1 if attendace rate is >0.90	=1 if attendace rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA	=1 if above the median
		[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
		Table 4									
Treatment		0.006	-0.002	0.015	0.043	0.055	0.010	0.030	0.012	0.020	0.017
	p-value	0.396	0.922	0.771	0.397	0.137	0.867	0.739	0.867	0.739	0.822
		Table 5 - Panel A									
Treatment * Non-parental care at baseline		0.012	0.114*	0.11*	0.147**	0.100	0.128	0.073	0.106	0.123*	0.086*
	p-value	0.159	0.092	0.092	0.035	0.292	0.199	0.381	0.292	0.067	0.067
Non-parental care at baseline total effect		0.011	0.047	0.040	0.117***	0.086	0.052	0.044	0.055	0.072	0.054
	p-value	0.194	0.443	0.443	0.001	0.172	0.370	0.370	0.321	0.116	0.264
		Table 5 - Panel B									
Treatment * Other adults		0.008	0.089	0.056	0.147	0.125	0.135	0.109	0.159	0.143*	0.09*
	p-value	0.539	0.367	0.539	0.123	0.208	0.208	0.223	0.208	0.080	0.089
Treatment * Alone		0.032**	0.203**	0.307***	0.227**	0.110	0.217	0.119	0.104	0.187**	0.134
	p-value	0.011	0.012	0.001	0.014	0.467	0.217	0.467	0.467	0.013	0.267
Other adults total effect		0.006	0.022	-0.014	0.117*	0.111*	0.059	0.079	0.106	0.092	0.058
	p-value	0.702	0.906	0.906	0.064	0.096	0.309	0.288	0.115	0.111	0.280
Alone total effect		0.031***	0.135**	0.237***	0.196***	0.096	0.141	0.088	0.051	0.136	0.102
	p-value	0.004	0.048	0.005	0.006	0.475	0.406	0.631	0.636	0.130	0.436

Note: This table reproduces results in Table 4 and 5 in text, but presents multiple hypothesis adjusted p-values. Columns [2] - [10] report the intent-to-treat (ITT) estimates and wild-cluster p-values of program assignment. Column [1] reports the first stage for program participation. The sample size varies according to the number of observations with missing values in the respective outcome variable. In panel A, non-parental care is a dummy variable that takes value of 1 for all the kids who weren't taken care of by their parents at baseline, zero otherwise. In panel B, the base category is taken care of by parents. All regressions include school-strata fixed effects and control for age. *** p<0.01, ** p<0.05, * p<0.1.

Table C-2: Adjusted p-values for for multiple hypothesis testing - Heterogenous Effects by Quality (Table 6)

	Panel A: Attendance			Panel B: Grades						
	Attendance rate May- November	=1 if attendance is >0.90	=1 if attendance rate is >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA	=1 if above the median
	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
(1) Above median quality index (Mean= 0.579)	0.003	0.075	0.034	0.051	-0.012	-0.016	0.040	0.032	0.030	0.054
p-value	0.789	0.161	0.717	0.786	0.953	0.953	0.907	0.907	0.884	0.606
p-value full effect	0.430	0.729	0.729	0.403	0.537	0.893	0.688	0.840	0.660	0.624
(2) At least 25% of monitors are school teachers (Mean= 0.226)	0.013	-0.017	-0.056	-0.013	0.034	-0.029	-0.073	0.024	-0.008	-0.001
p-value	0.458	0.735	0.425	0.988	0.988	0.988	0.569	0.982	0.988	0.988
p-value full effect	0.351	0.612	0.486	0.964	0.578	0.964	0.803	0.854	0.964	0.981
(3) Monitors with above the median experience (4 yrs) (Mean= 0.497)	-0.002	-0.012	-0.014	-0.035	0.041	-0.048	-0.037	0.004	0.006	0.001
p-value	0.985	0.985	0.985	0.903	0.940	0.920	0.932	0.998	0.998	0.998
p-value full effect	0.790	0.855	0.926	0.982	0.376	0.971	0.994	0.982	0.971	0.994
(4) Program components defined by march (Mean= 0.697)	0.006	0.063	0.012	0.096	0.011	0.054	0.085	0.013	0.050	0.099
p-value	0.566	0.197	0.815	0.258	0.954	0.732	0.497	0.954	0.501	0.102
p-value full effect	0.789	0.923	0.923	0.209	0.422	0.929	0.487	0.953	0.593	0.252
(5) Fixed time slot devoted to study (Mean= 0.801)	-0.023	-0.046	-0.069	-0.011	-0.062	-0.080	0.061	-0.061	-0.028	0.050
p-value	0.353	0.353	0.344	0.837	0.594	0.717	0.793	0.717	0.793	0.793
p-value full effect	0.842	0.901	0.901	0.213	0.456	0.928	0.484	0.962	0.595	0.279
(6) Planification is closely followed (Mean= 0.420)	-0.004	-0.040	0.015	0.029	-0.005	0.014	-0.020	-0.019	0.001	0.011
p-value	0.888	0.708	0.888	0.962	0.998	0.998	0.998	0.998	0.998	0.998
p-value full effect	0.763	0.369	0.763	0.068	0.379	0.984	0.984	0.984	0.831	0.978
(7) Students/Monitor ratio is below the median (Mean= 0.560)	-0.002	-0.049	-0.048	-0.008	-0.013	-0.038	-0.089	0.016	-0.030	-0.115**
p-value	0.755	0.607	0.607	0.979	0.979	0.939	0.531	0.979	0.936	0.017
p-value full effect	0.908	0.591	0.908	0.842	0.614	0.842	0.842	0.936	0.936	0.370

Note: This table reproduces results in Table 6 in text, but presents multiple hypothesis adjusted adjusted p-values. Columns [2] - [10] report the intent-to-treat (ITT) estimates and wild-cluster p-values of program assignment interacted with different measures of the program quality. Column [1] reports the first stage per program participation. The sample size varies according to the number of observations with missing values in the respective outcome and quality variable.

The different high quality dummies are defined in the following way:

(1) Above median quality index. The quality index is defined including measures of infrastructure, materials and monitor quality as reported in the process evaluation. The index does not include measures related to children's behavior. (2) At least 25% of monitors are school teachers. (3) On average, monitors have at least 4 years (median) of experience. (4) By march, the program components were already defined. (5) There was a fixed time slot devoted to study. (6) Planification (as describe in the original proposal) is closely followed (all the observed activities are described in the original plan). (7) Students/Monitor ratio is below the median.

All regressions include school-strata fixed effects and control for age. *** p<0.01, ** p<0.05, * p<0.1.

Table C-3: Adjusted p-values for for multiple hypothesis testing - Heterogenous Effects by Workshop Theme

	Panel A: Attendance				Panel B: Grades					
	Attendance rate May- November	=1 if attendance is >0.90	=1 if attendance rate >0.95	Art	Physical Education	Language and Literature	Math	Science	GPA	=1 if above the median
	[2]	[3]	[4]	[6]	[7]	[8]	[9]	[10]	[11]	[12]
(1) At least one TICs course (Mean= 0.286)	-0.006	0.042	0.005	0.068	0.006	0.027	0.111	0.049	0.043	0.030
p-value	0.668	0.668	0.931	0.342	0.909	0.909	0.403	0.744	0.664	0.777
p-value full effect	0.840	0.798	0.840	0.023	0.391	0.428	0.236	0.428	0.316	0.359
(2) At least one science (including social sciences) course (Mean= 0.543)	0.005	-0.030	0.025	0.045	0.019	0.073	0.021	0.023	0.022	0.050
p-value	0.801	0.801	0.801	0.768	0.896	0.657	0.896	0.896	0.896	0.657
p-value full effect	0.436	0.602	0.602	0.036	0.092	0.501	0.501	0.533	0.425	0.434
(3) At least one personal care course (Mean= 0.425)	-0.005	0.015	0.008	-0.004	0.032	-0.090	0.069	0.051	0.003	0.008
p-value	0.861	0.910	0.910	0.993	0.837	0.399	0.665	0.670	0.993	0.993
p-value full effect	0.374	0.886	0.689	0.680	0.092	0.522	0.438	0.438	0.706	0.706
(4) At least one sport course (Mean= 0.771)	0.001	0.013	-0.042	-0.016	-0.039	-0.089	0.032	-0.045	-0.036	0.010
p-value	0.983	0.929	0.770	0.946	0.699	0.598	0.930	0.780	0.780	0.946
p-value full effect	0.301	0.997	0.959	0.646	0.436	0.967	0.733	0.967	0.896	0.841
(5) At least one art course (Mean= 0.784)	0.012	0.004	0.032	-0.052	0.006	0.073	-0.045	-0.036	-0.013	-0.024
p-value	0.152	0.919	0.794	0.761	0.997	0.382	0.758	0.864	0.872	0.864
p-value full effect	0.265	0.947	0.617	0.700	0.177	0.888	0.895	0.895	0.888	0.895
(6) At least one drama, dance or circus course (Mean= 0.669)	0.007	-0.023	-0.029	0.010	0.013	-0.048	-0.053	-0.014	-0.011	-0.012
p-value	0.729	0.797	0.797	0.996	0.996	0.894	0.894	0.996	0.996	0.996
p-value full effect	0.425	0.895	0.895	0.646	0.268	0.973	0.973	0.973	0.951	0.972
(7) At least one music course (Mean= 0.093)	0.007	0.120	0.140	-0.110	-0.119**	0.226*	0.207*	0.112	0.059	-0.033
p-value	0.679	0.323	0.246	0.219	0.033	0.052	0.058	0.531	0.686	0.734
p-value full effect	0.438	0.365	0.199	0.616	0.104	0.029	0.029	0.519	0.616	0.868

Note: This table reproduces results in Table 7 in text, but presents multiple hypothesis adjusted p-values. Columns [2] - [10] report the intent-to-treat (ITT) estimates and wild-cluster p-values of program assignment interacted with workshop themes dummies. Column [1] reports the first stage per program participation. The sample size varies according to the number of observations with missing values in the respective outcome and workshop theme.

Note that at each school children could attend different kind of workshops. Workshop themes dummies are defined to indicate whether at each school at least one workshop was offered in seven different areas: sciences or more academic subjects; personal care; sports, arts, drama/dance/circus; arts; music.

All regressions include school-strata fixed effects and control for age. Cluster standard errors at school level are given in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

Table C-4: Adjusted p-values for for multiple hypothesis testing (for Table 8 in text)

	Labor Force Participation			Employment			Working Hours	Income	
	Participates (at least one month during May-Dec)	Participates (always)	Months Participating (May-Dec)	Works (at least one month during May-Dec)	Works (always)	Worked Months		Monthly Income	Hourly Income
Panel A: Parental versus non-parental care									
Table 8 - Panel A									
Treatment * Non-parental care at baseline	0.058	0.014	0.291	0.003	0.017	0.145	-1.848	-15.589	0.148
p-value	0.534	0.986	0.673	0.986	0.986	0.986	0.874	0.943	0.986
Non-parental care at baseline total effect	0.015	0.011	0.111	0.001	0.000	0.338	-0.681	10.429	0.341
p-value	0.958	0.968	0.968	0.998	0.998	0.702	0.968	0.881	0.588
Table 8 - Panel B									
Treatment * Other adults	0.043	0.009	0.229	-0.022	-0.006	0.009	-2.931	-10.420	0.093
p-value	0.931	0.998	0.966	0.990	0.998	0.998	0.541	0.990	0.998
Treatment * Alone	0.027	-0.006	0.076	0.005	0.057	0.239	-2.445	-50.316	0.073
p-value	0.986	0.997	0.997	0.997	0.980	0.996	0.979	0.588	0.996
Other adults total effect	0.000	0.006	0.046	-0.024	-0.023	0.201	-1.764	15.371	0.286
p-value	0.998	0.980	0.980	0.942	0.942	0.942	0.844	0.805	0.773
Alone total effect	0.381	0.031	0.135	0.237	0.196	0.096	0.141	0.088	0.051
p-value	0.994	0.994	0.994	0.994	0.993	0.923	0.994	0.929	0.950

Note: This table reproduces results in Table 8 in text, but presents multiple hypothesis adjusted p-values. Columns [2] - [10] report the intent-to-treat (ITT) estimates and wild-cluaster p-values of program assignment. Column [1] reports the first stage for program participation. The sample size varies according to the number of observations with missing values in the respective outcome variable. In panel A, non-parental care is a dummy variable that takes value of 1 for all the kids who weren't taken care of by their parents at baseline, zero otherwise. In panel B, the base category is taken care of by parents. All regressions include school-strata fixed effects and control for age. *** p<0.01, ** p<0.05, * p<0.1.